F05000002062

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DEFARIMENT OF STATE DIVISION OF CORPORATIONS TALLAHASSEE, FLORIDA

RECEIVED

SECRETARY OF STATE

AR 1/19/11



ACCOUNT NO. : I2000000195

REFERENCE : 645804 7270423

AUTHORIZATION

COST LIMIT

ORDER DATE: January 18, 2011

ORDER TIME : 3:20 PM

ORDER NO. : 645804-020

CUSTOMER NO: 7270423

CHANGE OF AGENT

NAME: APPLICA AMERICAS, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_ CERTIFIED COPY XX PLAIN STAMPED COPY

CONTACT PERSON: Doreen Wallace

EXAMINER'S INITIALS:

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Floric ange is submitted for a corporation organized under the laws of the State of \dot{r} to change its registered office or registered agent, or both, in the State of	of Delaware
1. The name of	the corporation: Applica Americas, Inc.	
	office address: 3633 S. Flamingo Road, Miramar, FL 33027	
3. The mailing a	ddress (if different):	
4. Date of incorp	poration/qualification: 04/04/2005 Document number:	F05000002062
	I street address of the current registered agent and registered office on file tment of State: (If resigned, enter resigned)	with the
	Carstarphen, Lisa R	
	2633 S Flamingo Road	1A S
	Miramar, FL 33027	
6. The name and (if changed):	I street address of the new registered agent (if changed) and /or registered	PILED 2011 JAN 18 PH 5: 00 SECRETARY OF STATE TALLAHASSEE. FLORID
	Corporation Service Company	- STAT
	1201 Hays Street	Dr. O
	P.O. Box NOT acceptable	
	Tallahassee, FL 32301	
The street addre as changed will	ess of its registered office and the street address of the business office of be identical.	f its registered agent,
Such change wa authorized by th	as authorized by resolution duly adopted by its board of directors or by the board, or the corporation has been notified in writing of the change.	an officer so
/	Terry Polistina, I	President
I hereby accept I further agree to of my duties, an document is bei corporation has Sign	the appointment as registered agent and agree to act in this capacity. To comply with the provisions of all statutes relative to the proper and of a lam familiar with and accept the obligation of my position as register in the registered office address, I he been notified in writing of this change. Doreen Wallace Assistant Vice President half of an entity:	
- •		
	Wallace, Asst. Vice Pres.	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

* * * FILING FEE: \$35.00 * * *